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PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000078864 (1)

INDUSTRIAL INSTALLATIONS SERVICES. INC.

FILED May 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1417 POINSETTIA AVENUE 1417 POINSETTIA AVENUE TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3411598 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Sulte, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & Stale City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country This corporation owes or has paid the current year Intangible ☐ No 30 Personal Property Tax due June 30. 24 29 10. Name and Address of New Registered Agent . Name and Address of Current Registered Agent HARTON, WILLIAM M III 1417 POINSETTIA AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 TARPON SPRINGS FL 34689 84 Zip Code City 11. Pursuant to the provisions of Sections 607 050 office or register of agent, or both in the State agent. I am familiar withy and acceptant oblide hits this statement for the purpose of changing its registered of directors. I hereby accept the appointment as registered SIGNATURE Storeture, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS Change Addition DELETE 1 1 TITLE TITLE **GAINEY, GARY** 1.2 NAME NAME 1705 AVOCA DRIVE 1.3 STREET ADDRESS STREET ADDRESS ARPON SPRINGS FL 34689 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE HARTON, WILLIAM M III 2.2 NAME NAME 1417 POINSETTIA AVENUE 2.3 STREET ADDRESS STREET ADDRESS TARPON SPRINGS FL 34689 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAMÉ 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY+ST-ZIP CITY-ST-ZIP he exemption stated in Section (19.07(3)/), Florida Statutes. I further certify that the information late (ricf hat my signature shall have the name legal effect as if made under oath; that I am an execute this report as required by Ghappa 607, Florida Statutes; and that my name appears in 14. I hereby certify that the information supplied with this filing does no indicated on this annual report or supplied with this filing does no indicated on this annual report is to officer or director of the corporation or the receiver or chastge employed to be also be also because the supplied of t